

# HEALTH PATHWAYS

Volume 24, No. 18

"Created For Students, By Students!"

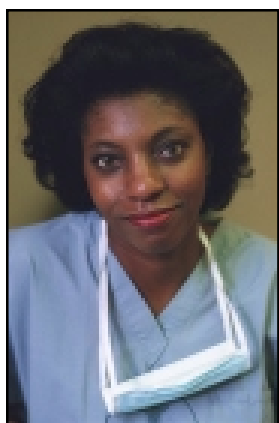
January 2002

## Great Expectations

by Jose Alaniz

*Today's nursing student programs prepare for tomorrow's challenges*

Motivated. Savvy. A team player. The nursing student will have to have these qualities after graduation. She – or, increasingly, he – can speak several languages and,



just as important, intimately understands the cultures from which those languages spring; has mastered the Web and how to navigate its

roiling seas of information to instantly find the precise data needed; feels at ease with all the

The nurse of the future is clairvoyant, anticipating healthcare trends 10 years away and training for them today. She is married, raising a family, coaching Little League, caring for aging parents, and using those free evenings to finish up a PhD and keep abreast of all the latest research – when not contributing some of her own, that is. Lastly, she is starting a cutting edge Internet/telemedicine venture, and consults on several others.

Sleep? "Hah! I haven't slept since the '90s," this nurse says. "Sleep is for sissies."

All right, maybe that last part is a slight exaggeration. But this composite picture provides some

idea of the exciting challenges and daunting pressures that nurses

*Nursing programs nationwide are using inventive tactics to attract the type of nurse needed to care for the future populations.*

latest medical technology as well as the intricacies of insurance policies, legal and ethical codes (state and federal), and the human psyche; and maintains crystal-clear lines of communication with colleagues, doctors and patients, defusing all interpersonal conflicts in a flash.

will face in the 21st century. Some statistics may further clarify the picture:

- The Bureau of Health Professions, U.S. Department of Health and Human Services, estimates that by 2010 the country

will need 1.4 million nurses with a BSN, but will have only 635,000. Of 532,000 nursing positions requiring a master's or PhD, only 250,000 nurses will actually be there to fill the demand.

- The Census Bureau reports that, although they represent 28 percent of the population, racial and ethnic minorities make up only about 10 percent of the nation's 2.5 million RNs. Hispanics, who comprise about 11.7 percent of all Americans, represent less than two percent of RNs.

- Although the Bureau of Labor Statistics predicts a hefty 21 percent job growth rate among registered nurses by 2006 (the largest among all professions), the American Association of Colleges

(see *Expectations* on page 9)

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The Office of Statewide Health Planning and Development publishes *Health Pathways* (ISSN 0164-7598) four times a year. Periodical postage paid at Sacramento, CA. Postmaster: send address changes to the editorial and business address below.

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We welcome contributions. Mail us your ideas, letters, announcements, or stories today! Announcements of scheduled events to be published must be mailed to our editorial office four months in advance. Be sure to include your name, address, and phone number on all correspondence. The *Health Pathways* editorial staff reserves the right to edit all material.

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**EDITORIAL AND BUSINESS OFFICE**

Health Professions Career  
Opportunity Program  
*Health Pathways Newsletter*  
1600 Ninth Street, Rm. 440  
Sacramento, CA 95814  
Tel: (916) 653-0733  
Fax: (916) 654-3138  
e-mail: kmunster@oshpd.state.ca.us  
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East Lansing, MI 48824-1317

# *Hints to help students thrive* Med School 101

by Trina Denton

As I trudge through the medical school application process, I have to admit I get depressed. Sometimes I have to remind myself why I love medicine enough to fill out endless forms asking me the same questions over and over again. And yet as I've learned from medical students, this won't be the last time I feel this way. For anyone struggling to stay positive amid the challenges of medical school, I recommend *The Med School Survival Guide* by Dr. Jennifer Danek (Three Rivers Press, \$12).

The book's subtitle—"How to Make the Challenges of Med School Seem like Small Stuff"—immediately attracted my attention, seeing as how merely applying to medical school was feeling like such an enormous task. But after reading the book, I am convinced

that medicine is the career for me, and that I will be able to handle, if not always enjoy, everything medical school throws at me.

*The Med School Survival Guide* shows readers how to take things in stride—in part by remembering what life is like outside of medical school. The book is divided into 101 "lessons" in nine categories: "Begin with a Healthy Attitude," "Excel in Your Studies," "Participate in Your Community," "Live a Balanced Life," "Learn to Heal," "Succeed on the Wards (and Enjoy Yourself!)," "Maintain Integrity," "Stay Healthy" and "Practice Peace."

Each lesson is something to be mindful of—in some cases they are things you know but may have forgotten along the way. Lesson 1, "Remember Who You Are," reminds readers that medical school can be a positive exper-

(see **101** on page 10)

# Western University of Health Sciences

Western University of Health Sciences, 309 East Second Street Pomona, CA 91766 (909) 623-6116, offers several educational workshops and conferences each year. Students and advisors interested in learning more about their programs are encouraged to attend. Dates and more information about these workshops and others can be found on their Web site at [www.westernu.edu/events.html](http://www.westernu.edu/events.html) or you may contact Heather Watkins at (909) 469-5330 or [hwatkins@westernu.edu](mailto:hwatkins@westernu.edu).

## **Osteopathic Medicine Awareness Conferences**

This full-day conference for prospective students interested in Osteopathic Medicine is offered in April, August and November each year. The agenda includes an overview of Osteopathic Medicine, presentations of the curriculum and admissions process, lunch and a campus tour with Western University students, a student panel and an explanation and demonstration of Osteopathic Manipulative Medicine (OMM).

an opportunity to learn more about our physical therapy curriculum, profession, and the admissions process. You will also have a chance to interact with Western University students during the student panel session and campus tour.

## **Health Career Opportunity & Survival Skills 2-Day Conferences (HCOP)**

The purpose of this conference is to provide economically and academically disadvantaged

students with information on the process and requirements to be admitted to health professions school. Attendees also receive instruction on improving test-taking and study skills. This conference is

offered twice per year in November and March.

## **Physician Assistant Information Sessions**

Offered on a monthly basis, these information sessions provide you an opportunity to learn more about our physician assistant curriculum, admissions process, and facilities. There will also be time for questions and conversations with faculty following the presentation.

## **Pharmacy Information Workshops**

This half-day workshop is offered in September and April each year and provides you an opportunity to learn more about our pharmacy curriculum, profession and the admission process. You will also have a chance to interact with Western University students during the student panel session and campus tour.



## **Physical Therapy Information Workshops**

This half-day workshop, offered in February and June, provides you

## *medical student resources*

**AMERICAN NURSES ASSOCIATION**  
600 Maryland Ave. SW,  
Suite 100 West  
Washington, DC 20024  
(800) 274-4262  
<http://nursingworld.org>

**AMERICAN PUBLIC HEALTH ASSOCIATION**  
801 I St. NW  
Washington, DC 20001  
(202) 777-2742  
<http://www.apha.org>

*Holds an annual meeting in November on the latest in cross cultural communication, culturally competent resources and research, and the impact of spiritual practices and religious beliefs on health status.*

**ASSOCIATION OF AMERICAN MEDICAL COLLEGES**  
2450 N St. NW  
Washington, DC 20037-1127  
(202) 828-0400  
<http://www.aamc.org>

**ASSOCIATION OF CLINICIANS FOR THE UNDERSERVED**  
501 Darby Creek Rd., Suite 20  
Lexington, KY 40509-1606  
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<http://clinicians.org>

**CROSS CULTURAL HEALTH CARE PROGRAM**  
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Seattle, WA 98144  
(206) 326-4161  
<http://www.xculture.org>

*Has bilingual medical glossaries, guides for interpreters, articles on interpreting, and videos.*

**LATINO COALITION FOR A HEALTHY CALIFORNIA**  
1535 Mission Street  
San Francisco, CA 94103  
(415) 431-7430  
<http://www.lchc.org>

# H C T P

Insert

Health Careers Training Program

January 2002

## New CNA to LVN Training Program

In June of 2001, the Health Careers Training Program was instrumental in forming a partnership with Modesto Junior College's Allied Health Division, and the Quality Care Health Foundation (QCHF), the Stanislaus County Department of Employment and Training, the Stanislaus County Community Services Agency (CSA), and local skilled nursing facilities. This partnership was formed to prepare 30 Certified Nursing Assistants (CNA) to take the licensure examination for Licensed Vocational Nurse (LVN).

These 30 trainees will participate in a prerequisite training program followed by a regular college LVN program accredited by the Board of Vocational Nursing and Psychiatric Technician Examiners. This program will include both classroom and clinical components led by community college instructors approved for this program. Referrals to this program will be orchestrated by the Department of Employment and Training (DET), in concert with local skilled nursing facilities.

Funding will also be sought from the State of California Employment



Training Panel (ETP) in support of local skilled nursing facilities during the training period.

The California Board of Vocational Nursing and Psychiatric Technicians requires no less than 1530 hours and 50 total units of coursework. Of those, a minimum of 576 hours must be Theory (including Pharmacology) and 954 hours must be Clinical. This program results in a minimum of 52 units and 1734 hours of training.

### **Entrants:**

The students who enter this program will be experienced CNA's who are currently working in long-term care facilities. Twenty-five of these students must be eligible for Workforce Investment Act (WIA) services and will be enrolled in that program through the DET. Students will either be nominated by their employers or referred by the DET

or Modesto Junior College. Upon graduation from training and receipt of their LVN license, students will work as LVN's for their original employers.

### **Acceptance:**

It is anticipated that forty students will be accepted into the prerequisite training phase of the program that runs from January to August 2002. During the course of this program, only 30 students will actually complete the program and advance to the clinical portion, due to size restrictions from the State Board.

Of the 30 students admitted, 25 will be WIA-eligible CNA's employed by local skilled nursing facilities—five being alternates. Ten students will be CNA's referred directly by local skilled nursing facilities—four being alternates. Five students will come from the community at-large—one of which will become an alternate. Any candidates that are not WIA-eligible will be supported by in-kind contributions from skilled nursing facilities (through ETP funding) and Modesto Junior College.

(see *Training Program* on page 7)

Visit us online at:

[www.oshpd.state.ca.us/pcrcd/professions/hctp.htm](http://www.oshpd.state.ca.us/pcrcd/professions/hctp.htm)

*As part of the Health Careers Training Program's attempt to provide you with information regarding allied health occupations, each issue will focus on at least one allied health profession and will include specific information regarding: job duties, working conditions, employment trends, salaries, entrance requirements, and advancement opportunities.*

# New Senior Nurse Assistant Position Opens

*Offering leadership within the CNA classification*

Recruitment and retention of nurse assistants has become a national concern. A significant factor in retaining current experienced CNAs is the lack of mobility within the classification. The only elevation is vocational nursing, which is a licensed position requiring considerably more education and training. This lack of mobility correlated with low pay and stressful working conditions seems to be accountable for the critical shortage of direct patient care providers that California now faces.



The nursing industry has demonstrated the need for innovative concepts for retaining and developing new and current Certified Nurse Assistant (CNA) positions. As a result, the issue of filling vacant positions is no longer a supply- side problem. Solutions must come from the demand side, the industry itself.

Through a survey of long-term care providers, acute care facilities, current nurse assistants, and other nursing staff, it was determined that

there is a need for a leadership position within the CNA classification. The position is the Senior Nurses Assistant (SNA) and it encompasses three areas: current scope of practice, leadership skills, and continuing education.

## Value to the employee:

- Increased career mobility and pay
- Increased job satisfaction with "transportable" recognition
- Attainable goal for current CNAs

## Value to the employers:

- Increased employee retention and cost efficiency by providing a career ladder
- Increased skill level and work performance of employees
- Will free up professional staff to do more technical patient care
- Recognized by licensing entity providing quality assurance
- Pay differentials between the CNA class and SNA included in the reimbursement system
- The work environment becomes more adaptive for new employees by providing an on-site mentor
- Increased employee retention provides continuity of care to patients

## Value to the system:

- Provides a more stable workforce
- Provides a continuing education component that increases the knowledge base of those who directly provide patient care
- Higher expenses for training and pay increases may be offset by increased work team efficiency, reduced cost of training due to employee turnover, and increased customer/patient satisfaction

The SNA is an integral member of the multi-disciplinary treatment team and as such, is essential in patient care planning. As a result, of the increased responsibilities, the SNA should have the flexibility of a decreased direct patient care workload of at least 30-50 percent. The main focus for this position is to enhance the overall continuity of patient care by providing support and mentoring for probationary and lesser experienced CNAs. Any loss of direct patient care time from SNA positions is more than compensated for in the increased floor productivity of all CNAs.

(see SNA on page 6)

(SNA from page 5)

Our research indicates that facilities with the lowest turnover rates are those that embrace the following components of a desirable work environment:

- Promotion from within
- “Open Door” policies, wherein Directors’ of Staff Development and other

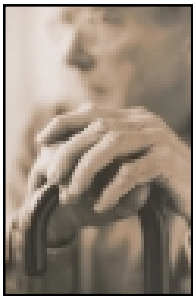
administrative staff are available to all staff on an on-going basis

- Staff incentive programs, such as “Caught-in-the-Act” programs
- CAHF and CAHSA (long-term care associations), EDD, ETP, and DHS support the

creation of the Senior Certified Nursing position.

These interventions display that administrative staff has a commitment to promoting a respectful and responsive environment for all facility staff and that all are viewed as valued team members.

Source: Garth Fryer, *Health Careers Training Program*.



## California Caregiver Training Initiative

### *Offering support and curriculum*

Riverside County recently created a partnership and successfully

applied for grant funding through the California State Caregiver Training Initiative. The partnership was awarded \$2,242,500 to provide innovative methods of increasing the number of quality care and wages of entry-level and incumbent health care workers.

This collaboration of public, not-for-profit and corporate systems plans to successfully implement a holistic and replicable approach to the health-care crises. Some of the partners for the project are San Bernardino County, Mt. San Jacinto Community College, Riverside Community College, College of the Desert/Workplace Learning Resource Center, and a collaboration of small home-health aid employers and an acute-care hospital project. The goal is to provide initial health care training as

Source: *Health Careers Training Program*

an in-home caregiver and/or a career path to more advanced levels of health-care certifications. These include acute care CAN, Geriatric Care Aide, Home Health Aide and promotion to LVN. There will be customized training programs that will include components targeting monolingual Spanish-speakers, limited English-speakers and emancipated foster care youth.

The College of the Desert’s Caregiver curriculum will be offered in English and Spanish. Additionally, there will be a Healthcare Vocational-English-as-a-Second-Language (VESL) component. The curriculum and classroom regalia will be portable in an effort to serve students on campus or in other locations including on-site training in care facilities. The caregiver training will be an approximately 40-hour certificate class using the foundational text, *The Comfort of*

Home, written by Maria Meyer for Care Trust Publications in Portland, Oregon. Training in Spanish and English will be provided in the following areas towards a community college certificate:

#### Caregiver Training Components

1. Basic Medical and Attendant Responsibilities
2. Legal, Liability and Elder Abuse Issues
3. Job and Career Opportunities
4. Employment Readiness and Personal Presentation
5. Medical Terminology and Basic Biology
6. Communication with Clients with Special Needs (Alzheimer’s, Dementia, Stroke, etc.)
7. Resource and Emergency Guides

For further information contact: Linda Young, College of the Desert at 760-776-7469  
lmyoung@dccd.cc.ca.us.

(*Training Program* from page 4)

### Eligibility:

In order to be accepted into the prerequisite training program, participants must:

- Possess a CNA license in the State of California
- Take the Modesto Junior College Reading/Math Assessment (minimum requirement – eligibility for English 50 and Math 70 at Modesto Junior College)
- Participants are recommended to complete Medical Terminology (MDAST 321, 3 units) prior to enrollment in the prerequisite training program

### Assistance:

Modesto Junior College will work closely with skilled nursing facility operators to orchestrate assessments and job profiles. Academic and personal counseling will also be provided through funding by the Stanislaus County Department of Employment and Training. Student support services will be provided to WIA-eligible participants including training materials, supplies, and uniforms required for clinical and classroom segments. Job search and placement assistance will also be offered by Modesto Junior College personnel, in collaboration with the Stanislaus Career Network team. In addition, clinical experience will be provided at local skilled nursing facilities and/or local acute care facilities during daytime working hours. Classroom hours will be scheduled during late afternoons and evenings.

Source: Anita McDaniel-Conway, *Health Careers Training Program*.

*CAHF member facilities will provide the following support for LVN candidates:*

Continued employment for CNA students involved in the training program. Flexible training schedules for LVN training candidates including consideration for adequate travel time. Candidates will receive preference for assignment of work shifts, which do not conflict with their LVN training program. Upon completion of LVN training and successful passage of the Board of Vocational Nursing Exam, employers will commit to promote candidates to a licensed nursing position, with a minimum pay of \$13 per hour.

*Modesto Junior College will provide the following support for LVN candidates:*

Instructional staff meeting the minimum qualifications to teach in a community college allied health program and requirements for the California Board of Vocational Nursing. Instructional aide/s as necessary. Academic counseling and referral for program participants. Administrative support for the program. Classroom and hands-on occupational skills training as described in appendix.

### Expected Outcome:

Upon completion of the CNA to LVN program 30 CNA's will be prepared to take the examination for LVN licensure and local skilled nursing facilities will gain a trained & certified pool of LVN's.

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#### OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

Director

David M. Carlisle, M.D., Ph.D.

#### HEALTHCARE WORKFORCE AND COMMUNITY DEVELOPMENT DIVISION

Deputy Director

Pablo Rosales, M.P.A.

#### HEALTH CAREERS TRAINING PROGRAM

Lead Project Coordinator

B. Glen Varner

Phone: (916) 653-0283

E-mail: bvarner@oshpd.state.ca.us

Project Coordinator

Garth Fryer

Phone: (916) 654-1247

E-mail: gfryer@oshpd.state.ca.us

Project Coordinator

Robert Jacob

Phone: (916) 651-6223

E-mail: rjacob@oshpd.state.ca.us

Project Coordinator

Anita McDaniel-Conway

Phone: (916) 654-2888

E-mail: amcdanie@oshpd.state.ca.us

Student Assistant

Ryan Nagle

Phone: (916) 654-2754

E-mail: rnagle@oshpd.state.ca.us

Healthcare Workforce and Community Development Division

Health Careers Training Program

1600 Ninth St., Room 440

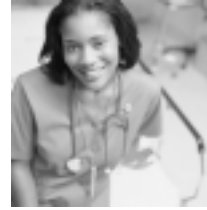
Sacramento, CA 95814

Fax: (916) 654-3138

The Health Careers Training Program insert is published four times a year as part of the *Health Pathways* Newsletter. HCTP is designed to help promote both public and private-sector collaborates that identify and develop health career training resources, funding resources and jobs for the unemployed, targeted layoffs, and dislocated workers. These partnership efforts help meet today's workforce demands of California's healthcare industry.

Editor: Andrea Alvarez

# Recruitment and Retention Critical to Minority Health Professionals



| by John West

Many observers believe that the cultural competency displayed by healthcare workers in all levels of an organization—or lack of it—has critically important effects on the quality of care received by that organization's patients and customers.

Better education and training of staff currently providing services in healthcare systems and facilities could go a long way toward improving patient-provider interactions. Equally critical is improved recruitment and retention of minority students into health and allied health professions.

US Census projections indicate that by the year 2010, the U.S. minority population will increase by 60 percent. Jordan J. Cohen, M.D., president of AAMC said, "this raises the question of whether or not enough medical students are developing the necessary cultural awareness and competence skills."

According to Nycal Anthony, president of Alliance for Quality Education, Inc., a Washington-based, health and education resource development firm, there is not an automatic fix to building a more culturally competent healthcare workforce. "Balancing the supply and demand needs is essential," she said. "To impact the education, recruitment, practice, and retention of physicians,

pharmacists, advanced practice nurses, dentists, registered nurses, physician assistants, and other allied health professionals will require a 'back to basics' approach. We need to strengthen the pipeline connecting people, education systems, legislatures, and many others to identify and implement strategies to succeed," she added.

Cohen further stated that despite the hard work of medical schools across the country, no more than 1,700 individuals from racial/ethnic groups, underrepresented in the physician workforce, will be among the some 16,100 receiving their symbolic "white coats" this month.

"At a time when underrepresented minorities make up more than 21 percent of our country's increasingly diverse population, having barely 10.5 percent of our classes drawn from these communities is downright alarming," he said (Reporter, Volume 9, Number 12: September 2000). Increased efforts must be made to enact public policy that values and endorses cultural competence in the healthcare workforce.

Associate Director of the Institute of Public Health at Florida A&M University, and the Publisher of the National Black Health Leadership Directory, Nathaniel Wesley, Jr.

said that increasing the number of individuals entering and exiting the pipeline as healthcare professionals is the key. "The basics of creating a culturally competent and diverse workforce requires access and opportunity," Wesley said. "Equal opportunity is still as critical today as during the civil rights movement," he added.

Wesley also said that without additional incentives, it is difficult for an undergraduate student to rationalize choosing a healthcare career with a starting salary of \$30,000 in comparison to an engineering career with a starting salary of \$45,000.

"In the future, we must return to pipeline programs that foster students through summer work study programs, encourage mentoring of new entrants into healthcare fields, and provide career counseling to midlevel health professions," Wesley said. According to Wesley, mentoring should not be monolithic in nature.

"There has to be more open and meaningful communication and development across all levels," he said. There must be a diverse cooperative pathway for success.

*Reprinted with permission: Closing the Gap, February/March 2001.*

(*Expectations* from page 1)

of Nursing points out that enrollment in bachelor's degree nursing programs has steadily declined during the past five years, dropping 4.6 percent in 1999, on top of a six percent decrease in 1998.

These and other trends related to the nursing shortage have prompted nursing programs nationwide to become creative, forging alliances with hospitals for tuition reimbursement and other financial aid, setting up "shadow programs" for high school students to come and see for themselves what nursing is like, and opening their doors to more immigrant and minority students.



But other experts warn that today's nursing education system needs even deeper changes to meet the new century's challenges.

"There's a gap between the way we educate and actual practice," said Beth Brooks, MS, RN, adjunct faculty at Lewis University College of Nursing in Chicago and director of patient education at InLight Inc., an e-health care firm. "We don't emphasize high-tech clinical settings, computerized documentation, the latest equipment. In some nursing schools, they still have crank beds. In today's environment, we have all sorts of managed care issues driving health care. We don't talk enough about those realities."

"Nurses are often not as savvy as they could be about how to use the Internet's resources for charting, sending e-mails, and research. Many are just drowning in information that they haven't yet learned to master and maximize. Nurses today need to develop Web sites, to get involved in content," Brooks said.

"We've had a long history of compromising things in the way we educate, and it's not been for the good of nursing or care of the patient," agrees Linda Aiken, PhD, RN, FAAN, professor of nursing and sociology at the University of Pennsylvania School of Nursing. "Nurses need to be educated for 10 years from now. With the ever-increasing body of knowledge in the health sciences, they need a better education. They need to learn expert clinical care. Specialization is a partial answer, but ultimately nursing programs need to focus on producing good generalists."

"In the 21st century healthcare environment, you must have an understanding and appreciation for cultural differences," said Phyllis Graham-Dickerson, PhD, RN, an assistant professor at the Colorado University School of Nursing in Denver.

"It's a fact that our society is becoming more and more diversified, and you as a caregiver have to understand where the patient is coming from. That's why multiculturalism courses are threaded throughout our curriculum. Diversity, both in terms of recruitment and awareness of our student body, is a real goal at our school."

*Nurses need to be educated for 10 years from now. With the ever-increasing body of knowledge in the health sciences, they need a better education. They need to learn expert clinical care. Specialization is a partial answer, but ultimately nursing programs need to focus on producing good generalists.*

Brooks "fought tooth and nail" to set up a case management program at her school, only to see it languish for lack of support. Medicine, one of the more conservative educational fields, tends to lag behind the times, she said.

With half of today's nursing workforce expected to retire within 15 years, the nursing student – the nurse of the future, that is – may not necessarily be a superman/woman, but the challenges to come will certainly require superhuman resources.

*Reprinted with permission: NurseWeek Magazine Online, August 2000.*



## Physician Assistant Students Willing to Practice in Medically Underserved Areas

The American Academy of Physician Assistants (AAPA) in Alexandria VA, estimates that 79 percent of Physician Assistant (PA) students are willing to practice in a medically underserved area. This estimate is based on the AAPA's 2000 Census Survey of New Physician Assistant Students.

Approximately 4,835 new students were reported to have enrolled in 122 accredited PA programs when the survey was distributed. Eighty-four percent of those new students participated in the AAPA survey.

Overall, 42 percent of respondents intend to specialize in family/general medicine. Twenty-six percent indicated emergency medicine as their intended specialty, and 25 percent were uncertain.

Prior to entering a PA program, 69 percent of respondents had obtained at least a bachelor's degree, with 50 percent earning a degree in biology and nine percent majoring in psychology.

Prior to enrollment in a PA program, 20 percent of respondents previously worked as an EMT/paramedic, 17 percent as a medical assistant, 14 percent as a nurse, and 10 percent as a phlebotomist.

A full copy of the AAPA's 2000 Census Survey of New Physician Assistant Students may be obtained by e-mailing [gmadden@aapa.org](mailto:gmadden@aapa.org) or calling 703/836-2272, ext. 3501.



Physician assistants are licensed health professionals who practice medicine as members of a team with their supervising physicians. PAs deliver a broad range of medical and surgical services to diverse populations in rural and urban settings. As part of their comprehensive responsibilities, PAs conduct physical exams, diagnose and treat illnesses, order and interpret tests, counsel on preventive healthcare, assist in surgery, and prescribe medications.

*AAPA is the only national organization to represent physician assistants in all medical and surgical specialties. Founded in 1968, the Academy works to promote quality, cost-effective healthcare and the professional and personal growth of PAs. For more information about the Academy and the PA profession, visit the AAPA's Web site, [www.aapa.org](http://www.aapa.org).*

(101 from page 2)

ience: "If you have a strong sense of yourself and continue to feed all aspects of your person, then medical school will make you stronger and richer." The author suggests that the reader answers questions such as these and revisit the answers throughout medical school.

Other lessons recommend ways to handle specific parts of medical school. Lesson 54, "Attend the Funeral," suggests that



when a patient dies, students may want to participate in the funeral or another ritual providing closure for them. Lesson 62, "Subscribe to Two Medical Journals," suggests that students can help themselves in the long run by acquiring the habit of reading—or at least skimming—the latest in medical news.

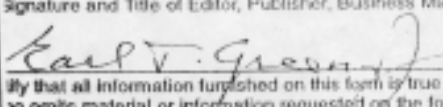
I think the best quality of this book is its approach. I have read many other guides that focus on how to look better, sound better or become a better person; however, the lessons in this book suggest an approach to medical school that

focuses not only on success, but also on finding meaning in the present. Overall, I found this book to be positive, reassuring and full on one-liners that you could use to formulate your own personal mantras. At the risk of sounding too commercial, I would say it is the perfect gift for a first-year medical student.

*Reprinted with permission: The New Physician, October 2001. Trina Denton, a senior at San Diego State University, hopes to enter medical school in 2003.*

United States Postal Service		
Statement of Ownership, Management, and Circulation		
1. Publication Title <b>HEALTH PATHWAYS - Newsletter of the Health Professions Career Opportunity Program</b>		2. Publication Number 4 5 0 - 2 1 0
3. Filing Date <b>10/01/2001</b>		
4. Issue Frequency <b>Four times per year October, January, April, July</b>		5. Number of Issues Published Annually <b>Four (4)</b>
6. Annual Subscription Price <b>Free</b>		
7. Complete Mailing Address of Known Office of Publication (Not printer) (Street, city, county, state, and ZIP+4) <b>Office of Statewide Health Planning and Development Health Professions Career Opportunity Program 1600 Ninth Street, Rm. 441, Sacramento, California 95814-6422</b>		Contact Person <b>Karen C. Munsterman</b> Telephone <b>(916) 654-2102</b>
8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer) <b>Same as above</b>		
9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)		
Publisher (Name and complete mailing address) <b>Office of Statewide Health Planning and Development Health Professions Career Opportunity Program 1600 Ninth Street, Rm. 441, Sacramento, California 95814-6422</b>		
Editor (Name and complete mailing address) <b>Karen C. Munsterman Office of Statewide Health Planning and Development Health Professions Career Opportunity Program, 1600 Ninth Street, Rm. 441, Sacramento, CA 95814</b>		
Managing Editor (Name and complete mailing address) <b>Earl Green Office of Statewide Health Planning and Development Health Professions Career Opportunity Program, 1600 Ninth Street, Rm. 441, Sacramento, 95814</b>		
10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the names and addresses of the individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)		
Full Name	Complete Mailing Address	
<b>Office of Statewide Health Planning and Development</b>	<b>1600 Ninth Street, Rm. 441 Sacramento, California 95814</b>	
11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box <input checked="" type="checkbox"/> None		
Full Name	Complete Mailing Address	
12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one) The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes: <input checked="" type="checkbox"/> Has Not Changed During Preceding 12 Months <input type="checkbox"/> Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)		

July 2001

6. Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
Total Number of Copies (Net press run)		12,803	12,895
Paid and/or Requested Circulation	(1) Paid/Requested Outside-County Mail Subscriptions Stated on Form 3541. (Include advertiser's proof and exchange copies)	12,703	12,700
	(2) Paid In-County Subscriptions Stated on Form 3541 (Include advertiser's proof and exchange copies)	0	0
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Copies not Distributed		99	147
Total (Sum of 15g. and h.)		12,803	12,895
Percent Paid and/or Requested Circulation (15c. divided by 15g. times 100)		99.00	99.00
Publication of Statement of Ownership			
Publication required. Will be printed in the <u>January 02</u> issue of this publication.		<input type="checkbox"/> Publication not required.	
Signature and Title of Editor, Publisher, Business Manager, or Owner		Date	
 Manager		10-10-01	
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In item 16, indicate the date of the issue in which this Statement of Ownership will be published.

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# HEALTH PATHWAYS

Office of Statewide Health Planning and Development  
Health Professions Career Opportunity Program  
1600 Ninth Street, Room 440  
Sacramento, California 95814  
(916) 653-0733

Periodical



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## Californians Met the Energy Challenge This Summer; Fall and Winter Will Test Our Commitment

Congratulations and thanks to every Californian who contributed to the state's success in meeting the energy challenge this summer! Your commitment to conservation played a major role in preventing rolling blackouts.

This year, the Office of Statewide Health Planning and Development, and other state offices, significantly cut electricity use from January through the end of August compared to the same period in 2000. For example, in monitoring 37 of the state's largest office buildings covering nearly 12 million square feet, the Department of General Services has recorded an average 22.4 percent drop in electricity use. Despite hikes in utility rates, the state was still able to save more than \$800,000 in cities such as Sacramento, Los Angeles, San Francisco, Oakland, San Diego, Van Nuys, and Riverside.

While the state has made extraordinary progress in bringing new power generation on line, the threat of shortages remains real. Conservation, both now and for the long term, will continue to be an important part of the strategy to keep the lights on.

Fall and winter months present challenges just as tough as the summer months. There are increased demands for power across the state for lighting, heating and other priorities. So we cannot let our guard down just because the seasons have changed.

To the right are some practical cool weather tips from the Flex Your Power website that will help all of us continue to save power, save money and keep electricity flowing to all California communities.

### Energy saving Tips:

Set your thermostat to 68 degrees when you're home and 55 degrees at night, or off when you're away.

### Use Your Appliances Wisely

- Turn off appliances, lights and equipment when not in use.
- To help prevent electricity outages, **do not run large appliances** between 5 a.m. - 9 a.m. and 4 p.m. - 7 p.m.
- Do your laundry efficiently by using the warm or cold water setting for washing your clothes and always use cold water to rinse clothes.
- Conserve energy by running your dishwasher only when it is fully loaded, and turn off the dry cycle to allow dishes to air dry instead.

### Inexpensive Energy Solutions

- Choose **Energy Star**® products. Purchase compact fluorescent light bulbs. They use a quarter of the energy and last five to ten times longer than conventional light bulbs.
- Reduce your hot water temperature. Set your water heater to the "normal" setting or 120 degrees unless the owner's manual for your dishwasher requires a higher setting.
- Replace furnace filters once a month. Dirty filters restrict airflow and increase energy use. Keep your furnace clean, lubricated and properly adjusted.
- Install low-flow showerheads. You'll be surprised how much this simple device can cut your hot water costs.
- Wrap your hot water tank with jacket insulation. If your water heater is gas, be sure to leave the air intake vent uncovered.

### Eliminate Wasted Energy

- Turn off lights in unoccupied rooms.
- Unplug electronic devices and chargers when they're not in use.
- Close the damper on your fireplace when you're not using it.
- Unplug that spare refrigerator in the garage if you don't really need it.

Check out [www.flexyourpower.ca.gov](http://www.flexyourpower.ca.gov) for more information and ways to save money!

